

Department of Health and Human Services
Office of MaineCare Services

PLEASE READ AND DISTRIBUTE TO CLAIMS STAFF
IMPORTANT CLAIMS INFORMATION FOR
Section 58- LCSW/LCPC/LMFT and Licensed Pastoral Counselors

Please review the following suggestions to avoid common billing errors when completing the CMS-1500 Claim Form:

1. DATES OF SERVICE

All dates of service indicated on the claim must be within the Prior Authorization (PA) date range of the authorization.

2. PA NUMBER

The PA number must be included on the claim form in Box 23. If you do not have a PA number for the service that has been authorized, please submit the PA Review to APS Healthcare via CareConnection. If you are unable to access CareConnection, the PA Review may be submitted by phone (1-866-5821-0027) or fax (1-866-521-0184).

Note: Services listed in this Billing Advisory, delivered **prior to March 1, 2008** require a MECMS PA Number through the Office of Child and Family Services (OCFS) or the Office of Elder Services (OES) to be submitted with claims. Services listed in this Billing Advisory, delivered **March 1, 2008 and after** require a MECMS PA Number to be submitted with claims.

3. PROCEDURE CODE

The procedure code must be listed in Box 24D of the CMS 1500 claim form.

PROCEDURE CODES that require PA

Children's Codes

Z9705-Psychosocial evaluation 15 minutes
Z9715-Collateral 15 minutes
Z9716-Group psychotherapy 15 minutes
Z9717-Individual psychotherapy 15 minutes
Z9718-Family psychotherapy 15 minutes
Z9719-Group psychotherapy by a co therapist 15 minutes
Z9720-Child and family service evaluation 15 minutes

Adult Codes

Z9708-Collateral 15 minutes
Z9709-Group psychotherapy 15 minutes
Z9710-Individual Psychotherapy 15 minutes
Z9711-Family psychotherapy 15 minutes
Z9712-Psychosocial evaluation 15 minutes
Z9722-Group psychotherapy by a co therapist 15 minutes
Z9723-Adult protective evaluation 15 minutes

4. SERVICING PROVIDER ID NUMBER

The above codes all require a Servicing Provider Number. Enter the servicing provider ID in Box 24K if you are using the CMS1500 (12/90) version of the claim form. Enter the servicing provider ID in Box 24J if you are using the CMS1500 (08/05) version of the claim form.

NOTE: If enrolled as an individual under Section 58, the provider may only see members that were referred by the Office of Elder Services (OES) or the Office of Child and Family Services (OCFS). The provider may see and bill the member if the member has been notified prior to receiving the service and the member agrees to pay for the services. If enrolled as a Servicing Provider under a Mental Health agency, the member does not require a referral from OES or BCFS.

5. CONTRACT AND PROVIDER NUMBER

Please make sure your agency has a contract with DHHS and a MaineCare Provider Number to provide LCPC/LCSW/LMFT or Licensed Pastoral Counseling services before billing for these services. The Department will not be able to issue a PA to provide services until the appropriate specialties are added to your MaineCare Provider Number. You will not be able to bill for these services without a PA number.

6. MEMBER ELIGIBILITY

The provider is responsible to verify member eligibility prior to providing the service. Since PA's are issued for future dates of service, if the member's eligibility for the authorized service ends during the PA period, the provider will not be reimbursed by MaineCare for services provided after the member's eligibility has ended.

7. BILLING QUESTIONS

All billing questions should be directed to the MaineCare Billing and Information Unit at 1-800-321-5557, Option 8. This Unit will assist providers with billing resolution. If it is determined that the issue needs a higher level of intervention, the caller will be referred to the appropriate Provider Relations Specialist.